

**CERTIFICATION OF ADMINISTRATIVE RULES  
FILED WITH THE SECRETARY OF STATE  
CATHY COX**

(Pursuant to OCGA §§ 50-13-3, 50-13-4, and 50-13-6.)

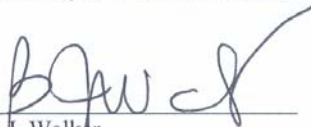
I do hereby certify that the attached is a correct copy of revised Rules 290-9-2-.01, 290-9-2-.04, 290-9-2-.05, 290-9-2-.06, 290-9-2-.07 and 290-9-2-.13, within Chapter 290-9-2 entitled "Rules and Regulations for Child-Placing Agencies" as promulgated and adopted on the 16th day of August, 2006.

GEORGIA DEPARTMENT OF HUMAN RESOURCES

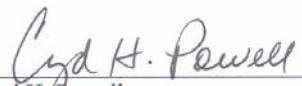
Filed August 21, 2006.

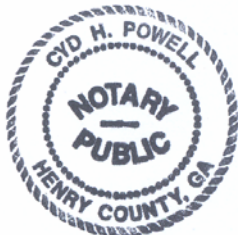
The attached Rules 290-9-2-.01, 290-9-2-.04, 290-9-2-.05, 290-9-2-.06, 290-9-2-.07 and 290-9-2-.13, within Rules Chapter 290-9-2 entitled "Rules and Regulations for Child-Placing Agencies" are hereby adopted in lieu of the existing Rules of the same numbers and titles.

Statutory Authority: OCGA §§ 31-2-6, 49-5-3, 49-5-12 and 49-5-60.

  
\_\_\_\_\_  
B. J. Walker  
Commissioner

Sworn to and subscribed before me  
this 21st day of August, 2006.

  
\_\_\_\_\_  
Cyd H. Powell  
Notary Public, Henry County, Georgia  
My commission expires February 1, 2008



**RULES  
OF  
DEPARTMENT OF HUMAN RESOURCES  
OFFICE OF REGULATORY SERVICES**

**CHAPTER 290-9-2**  
**RULES AND REGULATIONS FOR CHILD-PLACING AGENCIES**

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**290-9-2-.01 Definitions.** Unless the context otherwise requires, these words and phrases shall mean the following in these rules:

(a) “Adoption” means a social and legal process designed to establish a new legal parent/child relationship giving a child the same rights and benefits of a child who is born to the adoptive parent(s).

(b) “Adoptive family or adoptive home” means a family unit (which may include a single parent family unit) and their place of residence approved by an Agency to receive a child for adoption.

(c) “Adoptive parent(s)” means the adult member(s) of an adoptive family who expect to assume or have assumed all legal and social obligations and privileges of parents through the legal adoption of a child

(d) “Applicant” means an individual who has filed a formal application with an Agency for the purpose of receiving services related to foster care or for adoption of a child.

(e) “Behavior management” means those principles and techniques used by an agency to assist a child in facilitating self-control, addressing inappropriate behavior, and achieving positive outcomes in a constructive and safe manner. Behavior management principles and techniques shall be used in accordance with the individual service plan, written policies and procedures governing service expectations, treatment goals, safety, and security, and these rules and regulations.

(f) “Board” means the persons or legal entity in whom the ultimate legal responsibility, authority and accountability for the conduct of the Child-Placing Agency is vested.

(g) “Caseworker” means a person employed by the Agency who provides direct placement services and supervision following placements.

(h) “Casework supervisor” means a person employed by the Agency who is responsible for the supervision of the placement services offered by the Agency and for the designation of approval for the adoptive and foster families to receive children for care.

(i) “Chemical restraint” means drugs that are administered to manage a child’s behavior in a way that reduces the safety risk to the child or others; that have the temporary effect of restricting the child’s freedom of movement; and that are not being used as part of a standard regimen, as specified in the child’s service plan, to treat current symptoms of a medical or psychiatric condition.

(j) “Child” means a person under 18 years of age.

(k) "Child-Placing Agency or Agency" means a child welfare agency that is any institution, society, agency, or facility, whether incorporated or not, which places children in foster homes for temporary care or in adoptive homes for adoption.

(l) "Child placement, placement, or placement activity" means the selection, by a person or agency other than the child's parent or guardian, of a foster family or adoptive family, or effecting the movement of the child into the foster family or adoptive family. This definition includes any preparation of a home study of a foster home or an adoptive home. Counseling with respect to options available, legal services, or services as an agent for the purpose of notice of withdrawal of consent by the birth parent does not constitute child placement under this definition.

(m) "Crime" means any felony; a violation of O.C.G.A. Sec. 16-5-23, relating to simple battery; where the victim is a minor; a violation of O.C.G.A. Sec. 16-21-1, relating to contributing to the delinquency of a minor; a violation of O.C.G.A. Sec. 16-6-1 *et seq.*, relating to sexual offenses, excluding the offenses of bigamy or marrying a bigamist; a violation of O.C.G.A. Sec. 16-4-1, relating to criminal attempt when the crime attempted is any of the crimes specified by this paragraph; or any other offenses committed in another jurisdiction which, if committed in this state, would be one of the enumerated crimes listed in this paragraph.

(n) "Criminal record" means:

1. Conviction of a crime; or
2. Arrest, charge, and sentencing for a crime where:

(i) A plea of *nolo contendere* was entered to the charge; or

(ii) First offender treatment without adjudication of guilt pursuant to the charge was granted; provided, however that this

division shall not apply to a violation of O.C.G.A. Sec. 16-13-1 *et seq.*, relating to controlled substances, or any other offense committed in another jurisdiction which, if it were committed in this state, would be a violation of O.C.G.A. Sec. 16-13-1 *et seq.* if such violation or offense constituted only simple possession; or

(iii) Adjudication or sentence was otherwise withheld or not entered on the charge; provided, however, that this division shall not apply to a violation of O.C.G.A. Sec. 16-13-1 *et seq.* relating to controlled substances, or any other offense committed in another jurisdiction which, if it were committed in this state, would be a violation of Chapter 13 of Title 16 if such violation or offense constituted only simple possession; or

3. Arrest and being charged for a crime if the charge is pending, unless the time for prosecuting such crime has expired pursuant to O.C.G.A. Sec. 17-3-1 *et seq.*

(o) “Department” means the Georgia Department of Human Resources.

(p) “Emergency safety interventions” mean those behavioral intervention techniques that are authorized under an approved emergency safety intervention plan and are utilized by properly trained staff or foster parents in an urgent situation to prevent a child from doing immediate harm to self or others.

(q) “Emergency safety intervention plan” means the plan developed by the facility utilizing a nationally recognized, evidence-based, training program for emergency safety intervention, approved by the Department. The plan shall clearly identify the emergency safety interventions staff may utilize and those that may never be used.

(r) “Executive Director” means the person responsible for overall administration of an Agency.

(s) "Fingerprint records check determination" means a satisfactory or unsatisfactory determination by the department based upon a records check comparison of Georgia Crime Information Center (GCIC) information with fingerprints and other information in a records check application.

(t) "Foster care" means supervised care for a child in a home other than the child's own home on a 24-hour full-time basis for a temporary period of time.

(u) "Foster family or foster home" means a family unit (which may include a single parent family unit) and its residence that has been approved by an Agency to provide foster care for a child. A foster family may include no more than 6 children unrelated to the foster parent(s).

(v) "Foster parent(s)" means the adult member(s) of a foster family who provides supervision and care in a parental role for a child in foster care and who has a satisfactory criminal records check determination.

(w) "Home study" means assessment of the home environment of an applicant to determine suitability of that environment as a foster home or adoptive home.

(x) "License" means a document issued by the Department that grants permission for the holder to provide placement services.

(y) "Manual hold" means the application of physical force, without the use of any device, for the purpose of restricting the free movement of a child's body. A manual hold does not include briefly holding a child without undue force to calm or comfort the child, holding a child by the hand or by the shoulders or back to walk the child safely from one area to another where the child is

not forcefully resisting the assistance, or assisting the child in voluntarily participating in activities of daily living.

(z) "Mechanical restraint" means a device attached or adjacent to the child's body that is not a prescribed and approved medical protection device and that he or she cannot easily remove that restricts freedom of movement or normal access to his or her body.

(aa) "Preliminary records check application" means an application for a preliminary records check determination on forms provided by the department.

(bb) "Preliminary records check determination" means a satisfactory or unsatisfactory determination by the department based only upon a comparison of Georgia Crime Information Center (GCIC) information with other than fingerprint information regarding the person upon whom the records check is being performed.

(cc) "Record" means the individual file containing the written data collected or received by a Child-Placing Agency concerning a child who has been accepted for care or placement and includes the collection of data concerning the child's family, applicant, adoptive family, and/or foster parents.

(dd) "Records check application" means two sets of classifiable fingerprints, a records search fee to be established by the department by rule and regulation, payable in such form as the department may direct to cover the cost of a fingerprint records check, and an affidavit by the applicant disclosing the nature and date of any arrest, charge, or conviction of the applicant for the violation of any law; except for motor vehicle parking violations, whether or not the violation occurred in this state, and such additional information as the department may require.

(ee) "Satisfactory criminal records check determination" means a written determination that a person for whom a records check was performed was found to have no criminal record.

(ff) "Seclusion" means the involuntary confinement of a child away from other children, due to imminent risk of harm to self or others, in a room or an area from which the child is physically prevented from leaving.

(gg) "Sponsoring agency" means a Georgia Child-Placing Agency that serves as the primary coordinating agency with the foreign authorities, adoptive parents, and children being placed through intercountry adoptions.

(hh) "Time-out" means a behavior management technique that involves the brief separation of a child from the group, not to exceed twenty (20) minutes, designed to de-escalate the child. During "time-out" a child's freedom of movement is not physically restricted.

(ii) "Unsatisfactory criminal records check determination" means a written determination that a person for whom a records check was performed has a criminal record.

(jj) The singular includes the plural, the plural the singular, and the masculine the feminine, when consistent with the intent of these Rules.

Authority O.C.G.A. Sec. 49-5-3, 49-5-12.

#### **290-9-2-.04 Agency Personnel.**

(1) In accordance with these rules and regulations, the Agency shall have the administrative and professional service staff necessary to provide the services it is authorized to provide. Agencies operating multi-state programs under the supervision of



an Executive Director who resides outside of Georgia shall employ an assistant director to whom the responsibility for administration of the Georgia program shall be delegated.

(2) Executive Director. The Executive Director or assistant director with responsibility for the administration of the Georgia program shall have as a minimum a Bachelor's degree and two years administrative experience in the field of human services. If the Executive Director or assistant director is responsible for supervision of casework services or provides direct placement services he/she shall also meet the educational and experience requirements for a caseworker supervisor.

(3) The Executive Director or the assistant director with responsibility for the administration of the Georgia program shall be:

- (a) A full-time resident of the State of Georgia;
- (b) Responsible for administration of policies and procedures established by the Board for operation of the Agency;
- (c) Responsible for preparation, or assisting in the preparation of the annual budget, and control of expenditures according to budget allowance;
- (d) Responsible for personnel matters including hiring, assigning duties, in-service training, supervision, evaluation of staff and terminations; and
- (e) Responsible for professional leadership and technical consultation to the Board, determination of policy, and for periodic evaluations of the Agency's performance in terms of the conditions of licensure.

(4) Casework Supervisor. There shall be at least one casework supervisor employed by the Agency.

(a) The casework supervisor shall have the minimum qualifications of a master's degree from an accredited college or university in social work, psychology, childhood education, education counseling and psychology, or other human service or behavioral science field, with a minimum of two years of casework experience in a Child-Placing Agency.

(b) The Executive Director or assistant director may perform this function if qualified.

(c) The casework supervisor shall be responsible for the supervision of the placement services provided by the agency, and for the designation of approval for adoptive and foster families.

(5) Caseworker(s). There shall be at least one caseworker employed by the Agency.

(a) The caseworker shall have the minimum qualification of a bachelor's degree from an accredited college or university.

(b) The caseworker shall provide direct placement services and supervision following placements.

(c) A casework supervisor may perform this function.

(6) Annual Training. All supervisory and social service staff members, whether employees or contracted staff, must complete job-related training annually.

(a) Each supervisory and social service staff member employed or contracted by the agency to work more than twenty (20) hours per week shall be required to complete 15 hours of job-related training annually, as calculated from the employment date.

(b) Each supervisory or social service staff member employed or contracted for twenty (20) hours or less per week shall be required to complete 7 hours of job-related training annually, as calculated from the employment date.

(7) Clerical Staff. There shall be clerical staff employed by the Agency as necessary to keep correspondence, records, bookkeeping and files current and organized.

(8) Personnel Policies. The Agency shall have written personnel policies which shall include:

(a) Hiring and termination procedures;

(b) Job descriptions;

(c) Provisions for work performance evaluations conducted at least annually;

(d) Provisions for staff training, including the use of behavior management techniques and emergency safety interventions; and

(e) Provisions for addressing concerns, disagreements and grievances of staff relating to the care of children.

(9) Personnel Files. There shall be a personnel file on each employee which shall include:

(a) Application for employment;

(b) A satisfactory criminal record check completed in accordance with O.C.G.A. § 49-5-60, *et seq.*, and a ten-year employment history;

(c) Documentation of at least two professional, educational, or personal reference contacts that attest to the person's capabilities of performing the duties for which they are employed and to the person's suitability of working with or around children, with at least one of the reference contacts being a previous employer;

(d ) Satisfactory documentation of education and other qualifications prior to employment;

(e) Date of employment or contract with the Agency;

(f) Current job description;

(g) Annual performance evaluation reports and any records of discipline involving the inappropriate use of behavior management techniques or emergency safety interventions signed and dated by both the employee or contracted individual and the supervisor;

(h) Documentation of participation in job-related training, including the dates of all such training, as required annually;

(i) Letter of resignation or reason for termination;

(10) Contracted Social Service Staff. All contracted social service staff must meet the same qualifications as employees and have a contract file with all of the same items required for the personnel files of other Agency staff.

(11) Personnel practices shall conform to the written policies and to these rules and regulations.

Authority O.C.G.A. Sec. 49-5-12.

#### **290-9-2-.05 Agency Policies and Procedures for Services.**

(1) Policy and Procedure Manual. The Agency shall have and comply with a written manual of operating policies and procedures in accordance with these rules and regulations regarding its services. The policies and procedures shall include, but need not be limited to:

(a) Adoption services.

1. Services to parents exploring surrender of a child for adoption;
2. Procedures for termination of parental rights;
3. Procedures for accepting applications for adoption, for conducting home studies and for approval or disapproval of adoptive homes and families;
4. Procedures for placements, supervising placements, completing required court reports and assistance in finalizing the adoption;
5. Collection and refunding of fees; and
6. Process for obtaining a criminal records check of each petitioner prior to the finalization of the adoption according to current Georgia law.

(b) Foster Care Services.

1. Procedures for obtaining temporary custody or parental consent to provide foster care services;
2. Procedures for accepting applications from prospective foster parents, conducting home studies, approval or disapproval of foster homes;

3. Procedures for supervising foster home placements;
  4. Payment procedures for cost of care and other expenses to the foster parent(s);
  5. Provision of medical and dental care, allowance, clothing and other incidentals for children in foster care;
  6. Parental visiting;
  7. Behavior management of children in care; and
  8. Process for obtaining a satisfactory criminal records check clearance of all foster parents and other adults residing in the foster home prior to placing a child in the home, or of foster parents to continue a child in foster care, as required by current Georgia law.
- (c) Financial policies and procedures including fees, payment schedules, and refunds;
- (d) Establishing, maintaining and storing of records and files;
- (e) Interstate and intercountry placement of children;
- (f) The specific emergency safety intervention plan, including the emergency safety interventions that may be used; and
- (g) The prohibition and reporting of child abuse.
- (2) Prior to separation of a child from his home or family, the Agency shall require an assessment of the child's current situation.
- (3) If it is determined that it is not in the child's best interest to remain with the parents/guardians, they shall be required to be involved in the service planning so that the most appropriate form

of placement for the child (foster family care, residential group care or adoption) can be determined.

(4) Prior to accepting a child from another state or prior to placing a child outside Georgia for temporary care or for adoption, the Agency's procedures shall comply with the applicable state laws and with the provisions of the Interstate Compact on the Placement of Children (ICPC), O.C.G.A. Chapter 39-4.

(5) Agencies providing adoptive services shall have policies and procedures in compliance with the provisions of the State Adoption statutes, O.C.G.A. Chapter 19-8.

(6) The Agency shall have written procedures for addressing concerns, disagreements, complaints and grievances of applicants.

(7) Agency practices shall conform to the written policies.

(8) Whenever the Agency has reason to believe that a child in care has been subjected to child abuse it shall cause a report of such abuse to be made to the child welfare agency providing protective services as designated by the Department of Human Resources (Division of Family and Children Services) or in the absence of such an agency to an appropriate police authority or district attorney in accordance with the requirements of O.C.G.A. Sec. 19-7-5. A copy of such report shall also be filed with the Office of Regulatory Services.

Authority O.C.G.A. Chapters 19-8 and 39-4 and O.C.G.A. Secs. 19-7-5 and 49-5-12.

#### **290-9-2-.06 Adoption Services.**

(1) Orientation Information For Prospective Applicants. Prior to the acceptance of an application or fees of any kind, the Agency

shall provide information to prospective adoptive parents to assist them in making an informed decision about applying to adopt. The information may be in the form of a written handout. The information shall include at least:

- (a) The Agency's adoption services;
- (b) The Agency's eligibility requirements for adoption;
- (c) A description of the procedures involved with adoption;
- (d) The Agency's fee schedule and refund policies;
- (e) The approximate time the assessment and adoption process will take; and
- (f) The types of children available for adoption.

(2) Additional Orientation for Applicants. Once an application has been submitted by prospective adoptive parents, and prior to approval of the application, additional orientation information shall be supplied for the applicant(s), including but not limited to:

- (a) The legal procedures involved in adoption;
- (b) The minimum requirements for an adoptive home and the procedures for the home study;
- (c) The selection and placement process;
- (d) The process children use to locate birth parents, and the process birth parents use to locate children;
- (e) The Agency's grievance procedures; and



(f) The Agency's policies and procedures including those on behavior management techniques and emergency safety interventions.

(3) Home Study of the Prospective Adoptive Family. The Agency shall make a written evaluation, or study, of each potential adoptive family prior to the placement of a child in the home. If the applicant is approved, the required information shall be kept current, with modifications made as necessary if changes occur, until a placement is made.

(a) This home study of the applicant for adoption services shall include at least three visits on separate days. At least one visit shall be in the home and the applicant and all other family members shall be seen and interviewed.

(b) Prospective adoptive parents shall be interviewed together as well as separately.

(c) Dates of these visits and the name of the caseworker making the visits shall be documented in the adoptive home study.

(d) The study shall include at least the following information concerning the prospective adoptive family:

1. The names, home address, and home phone number of the prospective adoptive family, as well as the work phone number of the adoptive parent(s);

2. Motivation to adopt and the family members' attitude(s) toward childlessness;

3. Description of each family member, to include:

(i) Date and place of birth;

- (ii) Physical description;
  - (iii) Family background and history;
  - (iv) Current relationships with immediate and extended family members;
  - (v) Education;
  - (vi) Social involvements; and
  - (vii) Personal characteristics, such as personality, and interests and hobbies;
4. Evaluation of marriages and family life:
- (i) Date and place of marriages, if applicable;
  - (ii) History and assessment of marital relationship;
  - (iii) Family patterns; and
  - (iv) Previous marriages (verification of divorces, if applicable);
5. Evaluation of parenting practices:
- (i) Description of parenting knowledge, attitudes, and skills;
  - (ii) Behavior management practices;
  - (iii) Child rearing practices; and
  - (iv) Experience with children;
6. Evaluation of physical and mental health:

(i) Summary of health history and condition of each family member;

(ii) Documentation of a physical examination of the adoptive parent applicants completed by a licensed physician, physician's assistant, or a registered nurse with advanced training working under the direction of a physician, or the public health department, within 12 months prior to the completion of the home study;

(iii) A statement from a licensed physician, physician's assistant, or public health department regarding the general health status of other members of the prospective adoptive family, obtained within the 12 months prior to the completion of the home study; and

(iv) An informal assessment of the emotional and mental health of each member of the prospective adoptive family;

7. Evaluation of the understanding of and adjustment to adoptive parenting:

(i) The understanding of adoption and how adoption will be handled with the child;

(ii) Attitude toward birth parents;

(iii) Understanding of how adoptive parenting is different from biological parenting;

(iv) Attitude toward rearing a child biologically not their own;

(v) Understanding of the possibility of inherited traits and the influence of genetics vs. environment;

(vi) Expectations of the adopted child, including intellectual and physical achievement;

(vii) Understanding of loss in adoption;

(viii) Attitudes of other children residing in the home and extended family members toward adoption; and

(ix) The support network in place for the adoptive family, including support systems for single parent families, if applicable;

8. Evaluation of the prospective adoptive parents' finances and occupation:

(i) Employment history of family members;

(ii) Combined annual income;

(iii) Ability to provide financially for the family; and

(iv) Projected financial impact of the addition of an adopted child to the home;

9. A description of the home and community:

(i) Description of the neighborhood;

(ii) Physical standards of the home, including space, and water supply and sewage disposal systems which, if other than public systems, have been approved by appropriate authorities;

(iii) A statement to verify that any domestic pets owned or residing with the family have been inoculated against rabies as required by law;

(iv) A statement verifying that all firearms owned and in the home are locked away from children;

(v) A statement verifying that if a swimming pool is present at the home, it is fenced with a locked gate to prevent unsupervised access and that it meets all applicable community ordinances;

(vi) A statement that smoke alarms are present and functioning on each level in the home;

(vii) Verification that gas heaters are vented to avoid fire and health hazards, with any unvented fuel-fired heaters equipped with oxygen depletion safety shut-off systems;

(viii) Assessment of community resources, including accessibility of schools, religious institutions, recreation, and medical facilities;

10. Results of the criminal records check on prospective adoptive parents as currently required by current Georgia law;

11. A minimum of three character references:

(i) At least one reference must be from an extended family member not residing with the prospective adoptive family, and

(ii) If a prospective adoptive parent has worked with children in the past five (5) years, a reference must be obtained from the former employer(s) for that work experience;

12. Description of the child the applicant will consider, including age, sex, ethnicity, and any physical, medical, or emotional parameters;

13. Recommendation regarding approval as adoptive parents, including description of any identified training or resource needs; and

14. Date the home study is completed and the name and signature of the person completing the study.

(e) Home Study Updates. For certain circumstances as described below, a home study may be updated in lieu of completion of an entirely new home study. At a minimum, a home study update must include at least one home visit, the applicant's current employment status, updated medical reports, changes in family composition, and any changes in types of children requested. Additional information may be required as follows:

1. When a family is approved for an adoption placement by a Georgia agency, and a child has not been placed with the family within one year of the date of the approval by that agency, there shall be documentation annually of the reason(s) a placement has not been made, and a home study update shall be completed prior to a placement being made;

2. When a family is applying to adopt again after an initial adoption placement has resulted in a disruption, an update shall be completed and include information about the cause(s) of the previous disruption; and

3. An update of a home study from another state or from another Georgia agency shall require at least one home visit with all family members present and shall include additionally an evaluation of the physical standards of the home.

(f) Subsequent Home Studies. When a family is applying to adopt again after an initial placement has been made with that family, a subsequent home study shall be completed, which may contain the original home study for information which has not changed since that study, but must at a minimum include additionally:

1. At least one additional home visit since the time of the previous placement;
2. The applicant's current employment status;
3. Updated medical reports;
4. Changes in family composition;
5. Any changes in types of children requested;
6. An evaluation of the parents' adjustment to parenthood; and
7. A re-evaluation of parenting skills, knowledge, and techniques.

(g) Decision on Approval. A decision on approval of an adoptive family shall be made within 60 days of the last contact with the applicant or there shall be documentation in the record to explain any delay.

1. Applicants shall be notified in writing within ten (10) working days following the Agency's decision of their approval or disapproval as an adoptive family.

2. A narrative that clearly indicates the reason(s) a family was not accepted or did not have a child placed shall be included in the record of an unapproved applicant.

(4) Services to the Birth Family and Child.

- (a) The Agency shall offer and document services to both birth parent(s), including counseling and referral to other agencies when needed, to assist in determining the best plan of care for their child.

(b) The Agency and the birth parent(s) shall enter into a written agreement as early in the working relationship as possible specifying the services to be provided and the responsibilities and expectations of each party.

(c) Once an agreement has been established with the birth parent(s), the Agency's commitment to an appropriate placement of that child shall be irrevocable unless the birth parent(s) fail to abide by the terms of the agreement or it is determined by the Agency in good faith that the child cannot be legally freed for adoption.

(d) An Agency shall not induce the parent(s) to surrender the child by any financial aid or other consideration, or use coercion to influence their decision to either make an adoption plan or parent the child. The birth parent(s) shall sign a statement that no financial or in-kind compensation was promised or received except for reasonable living and medical expenses actually incurred.

(e) The Agency shall obtain medical and social background information for each birth parent such as name, age, nationality, religion, education, and occupation. Information to determine whether there are any significant hereditary facts or pathology, including illnesses of the birth parents and their families, that might affect the child's normal development, shall be included in the background information.

(f) When a birth mother refuses to disclose the name of the biological father, the record shall reflect the fact that she was advised of the legal consequence of non-disclosure of the name of the biological father.

(g) When a birth mother indicates that the identity of the biological father is unknown to her, the record shall reflect the fact that she was advised of the consequences of such a response and shall also reflect the reason why his identity is unknown to her.



(h) A copy of the executed surrender documents shall be given to the parent(s) at the time of the signing.

(i) The statutory right of the parent(s) to revoke the surrender of the child shall be respected.

(j) Requirements and procedures for any reimbursement of funds to the agency from the birth parent(s) in the event of a withdrawal or revocation of consent shall be made available in writing to the birth parent(s) and shall be discussed during initial interviews.

1. Requiring reimbursement for Agency operational expenses is prohibited.

2. If there is no required reimbursement of funds, a statement signed by the parent(s) and the Agency representative to that effect shall be in the file.

(k) The Agency shall accept a surrender of a child for adoption only after a thorough study has been made to determine:

1. That the parent(s) signing the surrender understands the meaning and consequences of surrender and of consent to adoption procedures, including time limitations for withdrawal or revocation of consent;

2. That all facts relative to the legal father are a part of the record; and

3. That adoption is in the child's best interest.

(l) A surrender shall not be accepted prior to the birth of the child, nor within 24 hours after the birth of the child.

(m) The surrender of parental rights shall be executed in the presence of a designated representative of the Agency, a witness and a notary. The Agency representative shall not serve as the witness or the notary.

(n) A surrender of parental rights shall not be accepted without the benefit of legal representation or action when:

1. In the Agency's opinion the parent appears to be incapable of exercising informed judgment; or

2. The birth parent refuses to sign a surrender or assume responsibility for the child.

(o) The Agency shall assure that a surrender of parental rights is executed in accordance with the provisions of the O.C.G.A. Chapter 19-8.

(p) The Agency shall be responsible for any legal services necessary for the termination of the parental rights of the legal father, if applicable.

(q) When an Agency accepts surrender of a child from a parent, the Agency shall assume primary responsibility for the child, including care and support, until the final decree of adoption.

(r) Parents shall be informed of Georgia's Adoption Reunion Registry and their legal rights to enter either a consent to contact or affidavit of nondisclosure should their child placed for adoption ever request contact with them upon reaching age twenty-one (21) or older.

(s) Records for the parent(s) and child shall contain:

1. Name, address, social security number, telephone number and marital status of the parent(s);

2. Social history of the family;
  3. A report of the circumstances precipitating the Agency's involvement with the parent(s);
  4. Agreement for services to parent(s) and child;
  5. Plan of care for the child;
  6. Health history of the parent(s) and child including a health examination of the child within one year prior to date of placement. Such examination shall be done by a medical doctor, physician's assistant, or a registered nurse with advanced training working under the direction of a physician, or public health department;
  7. Name, sex, race, birth date and birthplace of the child;
  8. Legal documents including verified birth certificate, court order, agreements, surrenders, consents, etc.;
  9. Documentation of the surrender or termination of parental rights;
  10. Documentation that parent(s) were informed of Georgia's Adoption Reunion Registry and of how they could register their wishes on the Registry; and
  11. Documentation of contacts with or made on behalf of the parent and child.
- (5) Services to the Biological Father Who Is Not the Legal Father of the Child.

(a) The Agency shall offer and document services to the biological father who is not the legal father of the child, if applicable.

(b) The Agency shall obtain medical and social background information for the biological father who is not the legal father such as name, age, nationality, religion, education, and occupation. Information to determine whether there are any significant hereditary facts or pathology, including illnesses of the biological father who is not the legal father and his families, which might affect the child's normal development, shall be included in the background information.

(c) A copy of the executed surrender documents shall be given at the signing to the biological father who is not the legal father.

(d) The statutory right of the biological father who is not the legal father to revoke the surrender of the child shall be respected.

(e) The Agency shall accept a surrender of a child for adoption only after a thorough study has been made to determine:

1. That the biological father who is not the legal father signing the surrender understands the meaning and consequences of surrender and of consent to adoption procedures, including time limitations for withdrawal or revocation of consent; and

2. That all available information relative to the biological father who is not the legal father is a part of the record.

(f) A surrender from the biological father who is not the legal father shall not be accepted prior to the birth of the child.

(g) The surrender of rights by the biological father who is not the legal father shall be executed in the presence of a designated

representative of the Agency, a witness, and a notary. The Agency representative shall not serve as the witness or notary.

(h) A surrender of rights shall not be accepted from the biological father who is not the legal father without the benefit of legal representation or action when:

1. In the Agency's opinion the biological father who is not the legal father appears to be incapable of exercising informed judgment; or

2. The biological father who is not the legal father refuses to sign a surrender.

(i) The Agency shall assure that a surrender of rights by the biological father who is not the legal father is executed in accordance with the provisions of the O.C.G.A. Chapter 19-8.

(j) The biological father who is not the legal father shall be informed of Georgia's Adoption Reunion Registry and his legal rights to enter either a consent to contact or affidavit of nondisclosure should their child placed for adoption ever request contact with them upon reaching age 21 or older.

(k) Records for the biological father who is not the legal father shall contain, if available:

1. His name, address, social security number, telephone number and marital status;

2. A report of the circumstances precipitating the Agency's involvement with him;

3. His health history;

4. Documentation of the surrender or termination of his rights to the child;

5. Documentation that he was informed of Georgia's Adoption Reunion Registry and of how he could register his wishes on the Registry; and

6. Documentation of contacts made with or made on behalf of him.

(6) Services Prior to An Adoption Placement. These services are provided after an applicant has been approved, and prior to the placement of a child for adoption.

(a) The Agency shall consider a child's racial, cultural, ethnic, and religious heritage and preserve them to the extent possible without jeopardizing the child's right for placement and care.

(b) Children of the same family shall be kept together when possible unless it has been determined through casework services that this is not desirable. If not in the best interest of the children involved, the reasons shall be documented in the records.

(c) The Agency shall discuss children for potential adoption with the approved adoptive family and shall prepare the adoptive family for the placement of a particular child or children, by anticipating the adjustments and problems that may arise during and after placement.

1. All available information about the child's development and background shall be shared in writing with the prospective adoptive parents.

2. A copy of the written health history shall be given to the adoptive parents for their use with the child's physician.

3. Documentation of these disclosures shall be included in the case record.

(d) The child shall be seen by the potential adoptive parent(s) prior to the signing of the placement agreement, and this event shall be documented in the case record. For intercountry adoptions, this rule shall not apply if the Agency does not have custody of the child.

(7) Services Following An Adoption Placement.

(a) The Agency caseworker shall make at least two home visits after the placement of the child and prior to the filing of the petition for adoption.

1. The first home visit may be made at any time after the placement of the child.

2. There shall be a minimum of two weeks between the required home visits for a child age twelve (12) months or younger.

3. There shall be a minimum of 30 days between the required home visits for a child over the age of twelve (12) months.

(b) Home visits shall be made with the adoptive family at least once a month prior to the filing of a petition for adoption.

(c) When foster parents are adopting their foster child, they may proceed with the filing of the petition prior to any home visits.

(d) If a petition for adoption is not granted within 90 days after filing, the Agency shall make additional home visits at least quarterly until a final order has been entered on the petition.

(e) Documentation of home visits will be maintained in both the adoptive family's and the child's file. Documentation of home

visits should include but not be limited to a summary of the entire family's adjustment to the adoptive placement, any problem or issue that has arisen, and the resolution of the problem or issue.

(f) The Agency shall explain to the adoptive family the requirement that the adoptive family engage an attorney of its choice for finalization of the adoption.

(g) The Agency shall help complete the adoption as required by the Superior Court through preparation and presentation of the written court report. A copy of the court report shall be filed with the state Office of Adoptions. Copies of the state birth verification and the court report shall be retained by the Agency in the adoption record.

(h) In an interstate adoption placement where Georgia is the state of origin, the requirements for services following an adoption placement may be met by fulfilling the requirements of the receiving state.

(8) Intercountry Adoptions. When an Agency is participating in intercountry adoptions, the following requirements must be met in addition to other requirements contained in these rules:

(a) An Agency participating in intercountry adoptions, whether as a sponsoring agency or by the provision of home studies, shall abide by all applicable federal and state laws and regulations, including immigration laws and those relating to intercountry agreements concerning adoptions.

(b) Where written agreements exist, an Agency shall retain copies of all agreements with foreign countries and English translations of those agreements.

(c) A sponsoring agency for intercountry adoptions shall retain documentation that:



1. The child is legally freed for adoption in the country of origin; and

2. All information about supervision after placement required by the country of origin has been provided prior to the finalization of the adoption.

(d) An Agency participating in intercountry adoption placements where the United States is the country of origin shall document that the following processes have occurred before the child leaves Georgia:

1. There has been termination of parental rights as required by the receiving country;

2. There has been termination of rights by the biological father who is not the legal father, if applicable;

3. There has been a determination of legal responsibility for the child in the new country; and

4. There has been validation that all the requirements for the adoption to occur in the foreign country can be satisfied.

(e) A sponsoring agency shall provide and document orientation for prospective adoptive parents in issues related to intercountry adoptions, including but not limited to:

1. Adoption requirements of the country of origin;

2. Health issues of the country of origin;

3. Institutional disorders; and

4. Developmental delay.

(f) A sponsoring agency shall document the provision of the following information to prospective adoptive parents:

1. Which countries finalize adoptions abroad, and which require that the adoption be finalized in the United States;
2. Information about the physical and mental health of the child;
3. Information regarding domestication of the foreign adoption decree; and
4. Information regarding obtaining U.S. citizenship for the child.

(g) The Agency shall apply the same standards for home study for intercountry placements as for other placements in Georgia and shall meet any federal requirements for the home study.

(h) Agencies providing intercountry adoption services, whether as a sponsoring agency, through the provision of home studies, or in any other capacity, shall disclose promptly to prospective adoptive parents any information that is or becomes available which may affect their adoption placement, including but not limited to any suspension of the adoption program by the foreign country.

(i) Agencies providing intercountry adoption services shall provide all applicants with policies governing refunds when adoption services that have been promised have not been rendered or when there is a disruption of services that may nullify an adoption.

(9) Maintenance of Adoption Records.

(a) The Agency shall maintain a record for each applicant for adoption services, to contain the application and other information

collected by the Agency pertaining to the applicant including but not limited to:

1. The adoptive home study and all documents required by the home study, such as criminal records checks;
2. Upon placement of a child in the home, a signed agreement as to the terms of the placement;
3. A copy of the information given to the parents concerning the child;
4. All legal documents pertaining to the adoption; and
5. A summary narrative on the pre-placement and post-placement contacts with the adoptive family and the adopted child. Entries shall be dated and shall identify the caseworker making the contacts.

(b) Adoption records shall be maintained permanently following finalization of the adoption. Immediately upon receipt of the final order or certificate of adoption, each individual record shall be sealed and secured from unauthorized scrutiny in accordance with the provisions of O.C.G.A. Sec. 19-8-23.

(c) For adoptions finalized after the effective date of these rules, the adoption records shall be converted to non-paper format, such as microfilm or computer format, within six months from the date of finalization of the adoption. The format type and date must be clearly labeled on the exterior of the record container.

(d) Records of evaluation of applicants for adoption services which do not result in the finalization of an adoption shall be maintained for at least one year following date of written notification to applicants of their unapproved status.

(e) All adoption records shall be stored in fireproof file cabinets.

(10) Behavior Management and Emergency Safety Interventions.

(a) Child training, behavior management, and emergency safety interventions shall be administered by the adoptive parent(s) and shall be appropriate to the child's age, intelligence, emotional makeup, and past experience.

(b) Techniques for child training and behavior management shall be positive in nature unless positive techniques, correctly and consistently applied, have been shown to be ineffective with the child.

(c) Behavior Management.

1. The agency shall develop and implement policies and procedures on behavior management that shall apply to those adoptive parents who are still in the adoption process. Such policies and procedures shall set forth the types of children served in accordance with its program purpose, the anticipated behavioral problems of the children, and acceptable methods of managing such problems.

2. Such Behavior management policies and procedures shall incorporate the following minimum requirements:

(i.) Behavior management principles and techniques shall be used in accordance with written policies and procedures governing service expectations, treatment goals, safety, security, and these rules and regulations.

(ii.) Behavior management shall be limited to the least restrictive appropriate method in accordance with the prohibitions as specified in these rules and regulations.

3. The following forms of behavior management shall not be used;

(i.) Assignment of excessive or unreasonable work tasks that are not related to the child's misbehavior;

(ii.) Denial of meals and hydration;

(iii.) Denial of sleep;

(iv.) Denial of shelter, clothing, or essential personal needs;

(v.) Denial of essential services;

(vi.) Verbal abuse, ridicule, or humiliation;

(vii.) Manual holds, chemical restraints, or mechanical restraints not used appropriately as emergency safety interventions;

(viii.) Denial of communication and visits with family unless restricted by case plan or court order;

(ix.) Corporal punishment;

(x.) Seclusion or confinement of a child in a room or area which may reasonably be expected to cause physical or emotional discomfort to the child; or

(xi.) Seclusion or confinement of a child to a room or area for periods longer than those appropriate to the child's age, intelligence, emotional makeup and previous experience, or confinement to a room or area without the supervision or monitoring necessary to ensure the child's safety and well-being.

4. Children shall not be permitted to participate in the behavior management of other children.

5. Agencies shall submit to the Department electronically or by facsimile a report, in a format acceptable to the Department, within 24 hours whenever an unusual incident occurs regarding behavior management, including any injury requiring medical treatment beyond first aid that is received by a child as a result of any behavior management.

6. All forms of behavior management used by direct care staff shall also be documented in case records in order to ensure that such records reflect behavior management problems.

(d.) Emergency Safety Interventions.

1. Emergency safety interventions may be used only by adoptive parents trained in the proper use of such interventions when a child exhibits a dangerous behavior reasonably expected to lead to immediate physical harm to the child or others and less restrictive means of dealing with the injurious behavior have not proven successful or may subject the child or others to greater risk of injury.

2. Emergency safety interventions shall not include the use of any restraint or manual hold that would potentially impair the child's ability to breathe or has been determined to be inappropriate for use on a particular child due to a documented medical or psychological condition.

3. The agency shall have and comply with written policies and procedures for the use of emergency safety interventions, a copy of which shall be provided to and discussed with each child and the child's adoptive parents prior to or at the time of admission.

Emergency safety intervention policies and procedures shall include:

(i) Provisions for the documentation of an assessment at admission and at each annual exam by the child's physician, a physician's assistant, or a registered nurse with advanced training working under the direction of a physician, or a public health department that states there are no medical issues that would be incompatible with the appropriate use of emergency safety interventions on that child. Such assessment and documentation must be re-evaluated following any significant change in the child's medical condition; and

(ii) Provisions for the documentation of each use of an emergency safety intervention including:

(I) Date and description of the precipitating incident;

(II) Description of the de-escalation techniques used prior to the emergency safety intervention, if applicable;

(III) Environmental considerations;

(IV) Adoptive parent(s) participating in the emergency safety intervention;

(V) Any witnesses to the precipitating incident and subsequent intervention;

(VI) Exact emergency safety intervention used;

(VII) Documentation of the 15 minute interval visual monitoring of a child in seclusion;

(VIII) Beginning and ending time of the intervention;

(IX) Outcome of the intervention;

(X) Detailed description of any injury arising from the incident or intervention; and

(XI) Summary of any medical care provided.

iii. Provisions for prohibiting manual hold use by any adoptive parent not trained and in prevention and use of emergency safety interventions.

4. Emergency safety interventions may be used to prevent runaways only when the child presents an imminent threat of physical harm to self or others.

5. Adoptive parents shall be aware of each child's medical and psychological conditions, as evidenced by written acknowledgement of such awareness, to ensure that an emergency safety intervention that is utilized does not pose a danger to the physical or mental health of the child.

6. Children shall not be allowed to participate in the emergency safety intervention of other children.

7. Immediately following the conclusion of the emergency safety intervention and hourly thereafter for a period of at least four hours where the child is with an adoptive parent, the child's behavior will be assessed, monitored, and documented to ensure that the child does not appear to be exhibiting symptoms that would be associated with an injury. Authority O.C.G.A. §§ 49-5-8 and 49-5-12.

8 At a minimum, the emergency safety intervention program that is utilized shall include the following:



- (i.) Techniques for de-escalating problem behavior including child and adoptive parent debriefings;
- (ii.) Appropriate use of emergency safety interventions;
- (iii.) Recognizing aggressive behavior that may be related to a medical condition;
- (iv.) Awareness of physiological impact of a restraint on the child;
- (v.) Recognizing signs and symptoms of positional and compression asphyxia and restraint associated cardiac arrest;
- (vi.) Instructions as to how to monitor the breathing, verbal responsiveness, and motor control of a child who is the subject of an emergency safety intervention;
- (vii.) Appropriate self-protection techniques;
- (viii.) Policies and procedures relating to using manual holds, including the prohibition of any technique that would potentially impair a child's ability to breathe;
- (ix.) Agency policies and reporting requirements;
- (x.) Alternatives to restraint;
- (xi.) Avoiding power struggles;
- (xii.) Escape and evasion techniques;
- (xiii.) Time limits for the use of restraint and seclusion;
- (xiv.) Process for obtaining approval for continual restraints and seclusion;

(xv.) Procedures to address problematic restraints;

(xvi.) Documentation;

(xvii.) Investigation of injuries and complaints;

(xviii.) Monitoring physical signs of distress and obtaining medical assistance; and

(xix.) Legal issues.

9. The emergency safety intervention training shall be in addition to the annual training required in Rule .04(6)(a) and (b) and shall be documented in the personnel record of the adoptive parents.

10. All actions taken that involve utilizing an emergency safety intervention shall be recorded in the child's record showing the cause for the emergency safety intervention, the emergency safety intervention used, and, if needed, approval by the executive director, the casework supervisor, and the physician who has responsibility for the diagnosis and treatment of the child's behavior.

11. Agencies shall submit to the Department electronically or by facsimile a report within 24 hours whenever an unusual incident occurs regarding emergency safety interventions, including:

(i.) Any injury requiring medical treatment beyond first aid that is received by a child as a result of any emergency safety intervention;

(ii.) For any agency with 20 or more adoptive placements, any 30-day period in which three or more instances of emergency safety interventions of a specific child occurred and/or whenever

the agency has had a total of 10 emergency safety interventions for all children in care within the 30-day period; and

(iii.) For any agency with less than 20 adoptive placements, any 30-day period in which three or more instances of emergency safety interventions of a specific child occurred and/or whenever the agency has had a total of five instances for all children in care within the 30-day period.

12. Adoptive parents shall submit a written report to the executive director on the use of any emergency safety intervention immediately after the conclusion of the intervention. A copy of such report shall be maintained in the child's file.

13. At least once per quarter, the agency, utilizing a master agency restraint log and the child's case record, shall review the use of all emergency safety interventions for each child and adoptive parent, including the type of intervention used and the length of time of each use, to determine whether there was a clinical basis for the intervention, whether the use of the emergency safety intervention was warranted, whether any alternatives were considered or employed, the effectiveness of the intervention or alternative, and the need for additional training. Written documentation of all such reviews shall be maintained. Where the agency identifies opportunities for improvement as a result of such reviews or otherwise, the agency shall implement these changes through an effective quality improvement plan.

14. No later than December 1, 2006 and ongoing thereafter, all adoptive parents who may be involved in the use of emergency safety interventions, shall have evidence of having satisfactorily completed a nationally recognized training program for emergency safety interventions to protect children and others from injury, which has been approved by the Department and taught by an appropriately certified trainer in such program.

## 15. Manual Holds

(i.) Emergency safety interventions utilizing manual holds require at least one trained adoptive parent to carry out the hold. Emergency safety interventions utilizing prone restraints require at least two trained adoptive parents to carry out the hold.

(ii.) Emergency safety interventions shall not include the use of any restraint or manual hold that would potentially impair the child's ability to breathe or has been determined to be inappropriate for use on a particular child due to a documented medical or psychological condition.

(iii.) When a manual hold is used upon any child whose primary mode of communication is sign language, the child shall be permitted to have his or her hands free from restraint for brief periods during the intervention, except when such freedom may result in physical harm to the child or others;

(iv.) If the use of a manual hold exceeds 15 consecutive minutes, the executive director or his or her designee, who possesses at least the qualifications of the executive director and has been fully trained in the agency's emergency safety intervention plan, shall be contacted by a two-way communications device or in person and determine that the continuation of the manual hold is appropriate under the circumstances. Documentation of any consultations and outcomes shall be maintained for each application of a manual hold that exceeds 15 minutes. Manual holds shall not be permitted to continue if the restraint is determined to pose an undue risk to the child's health given the child's physical or mental condition.

(v.) A manual hold may not continue for more than 30 minutes at any one time without the consultation as specified in subparagraph (ii) of this subparagraph, and under no circumstances

may a manual hold be used for more than one hour total within a 24-hour period.

(vi.) If the use of a manual hold on a child reaches a total of one hour within a 24-hour period, the adoptive parent shall reconsider alternative treatment strategies, document same, and consider notifying the authorities or transporting the child to a hospital or mental health facility for evaluation.

(vii.) The child's breathing, verbal responsiveness, and motor control shall be continuously monitored during any manual hold. Written summaries of the monitoring by a trained adoptive parent not currently directly involved in the manual hold shall be recorded every 15 minutes during the duration of the restraint. If only one trained adoptive parent is involved in the restraint and no other trained adoptive parent is available, written summaries of the monitoring of the manual hold shall be recorded as soon as is practicable, but no later than one hour after the conclusion of the restraint.

(16) Seclusion.

1. If used, seclusion procedures in excess of thirty (30) minutes must be approved by the executive director or designee. . No child shall be placed in a seclusion room or area in excess of one (1) hour within any twenty-four (24) hour period without obtaining authorization for continuing such seclusion from the child's physician, psychiatrist, or licensed psychologist and documenting such authorization in the child's record

2. A seclusion room or area shall only be used if a child is in danger of harming himself or herself or others.

3. A child placed in a seclusion room or area shall be visually monitored at least every 15 minutes.

4. A room or area used for the purposes of seclusion must meet the following criteria:

(i) The room or area shall be constructed and used in such ways that the risk of harm to the child is minimized;

(ii) The room or area shall be constructed so that an adoptive parent can visually monitor the child;

(iii) The room shall be lighted and well-ventilated;

(iv) The room shall be a minimum fifty (50) square feet in area; and

(v) The room must be free of any item that may be used by the child to cause physical harm to himself/herself or others.

5. No more than one child shall be placed in the seclusion room or area at a time.

6. A seclusion room monitoring log shall be maintained and used to record the following information:

(i) Name of the secluded child;

(ii) Reason for child's seclusion;

(iii) Time of child's placement in the seclusion room or area;

(iv) Name and signature of the adoptive parent that conducted visual monitoring;

(v) Signed observation notes; and

(vi) Time of the child's removal from the seclusion room or area.

**290-9-2-.07 Foster Care Services.**

(1) Foster care shall be considered only after it has been established that it is necessary for the physical and/or emotional well-being of the child.

(2) No more than 6 children under the age of 17 who are not related to the foster parent(s) may reside in a foster home.

(3) Orientation Prior to Foster Care Application. The Agency shall provide orientation information in person or in written form to prospective foster parents to assist them in making an informed decision about applying to become a foster parent. The format of the orientation must be documented in the applicant's file. The orientation information must include at least the following:

- (a) The Agency's purpose and a listing of services provided;
- (b) A description of the approval process for foster parenting;
- (c) The minimum requirements for foster parenting including the limits to the number of children in the home;
- (d) The roles and responsibilities of foster parents;
- (e) A description of children served by the Agency;
- (f) Support services available for foster parents;
- (g) General information regarding financial reimbursement for expenses in foster care; and

(h) Policies and procedures regarding appropriate behavior management and emergency safety interventions.

(4) Training for Prospective Foster Parents. Once an application to become a foster parent has been submitted, and prior to the approval of an applicant for placement of a child in foster care, the agency shall provide and document training for the applicant in at least the following topics:

(a) The Agency's grievance policies and procedures;

(b) The annual training requirements for foster parents, including the requirement for at least fifteen (15) hours of training relevant to the type(s) of children placed in the foster home for parents planning to provide foster care for children over the age of twelve months, or at least eight (8) hours of training for parents planning to provide foster care for children 12 months of age or younger.

1. For foster parents approved after the effective date of these rules, the training hours would be required annually based on the date of approval of the fostering application.

2. For foster parents approved prior to the effective date of these rules, the training hours would be required annually based on the effective date of these rules;

(c) The Agency's policies and procedures for behavior management techniques and emergency safety interventions for children in foster care;

(d) Child abuse recognition, reporting, and investigation procedures;

(e) Characteristics of children served and their developmental needs, including special needs when applicable, and



(f) The Agency's policies and procedures for handling medical emergencies (conditions or situations which threaten life, limb, or continued functioning), and managing use of medications by children in care.

(5) Minimum Requirements for Prospective Foster Families.

(a) Home Study. The Agency shall make a thorough evaluation of each prospective foster family and document this evaluation in a foster home study report which shall include at least the following:

1. The names of family members, the family address and telephone number, drivers' license numbers, and proof of automobile insurance as applicable;

2. The motivation for foster parenting, including but not limited to attitude toward childlessness;

3. A description of family members, including:

(i) Date and place of birth;

(ii) Physical description;

(iii) Family background and history;

(iv) Current relationships with immediate and extended family members;

(v) Education;

(vi) Social involvements;

(vii) Personal characteristics;

- (I) Personality;
- (II) Interests and hobbies; and
- (III) Emotional stability;
- 4. Evaluation of marriages and family life:
  - (i) Verified date and place of marriage, if applicable;
  - (ii) Assessment of marital relationship;
  - (iii) Family interaction patterns;
  - (iv) Previous marriages;
- 5. Evaluation of parenting practices:
  - (i) Description of parenting knowledge, attitudes and skills;
  - (ii) Current behavior management practices; and
  - (iii) Current child-rearing practices;
- 6. Physical and mental health:
  - (i) Health history and condition of family members;
  - (ii) Documentation of a physical examination of the adoptive parent applicants completed by a licensed physician, physician's assistant, or the public health department, within 12 months prior to the completion of the home study;
  - (iii) A statement from a licensed physician, physician's assistant, or public health department regarding the general health status of

other members of the prospective adoptive family, obtained within the 12 months prior to the completion of the home study;

(iv) Evaluation of emotional and mental health status of each member of the prospective foster family; and

(v) Screening for tuberculosis and venereal disease for prospective foster parents and children 16 years of age and older living in the prospective foster home;

7. Understanding of and adjustment to foster parenting:

(i) Understanding of the role of a foster parent and the issues in caring for foster children;

(ii) Foster family's attitude toward the parents of the foster children including parental visits in their home;

(iii) Expectations of the foster child, including intellectual and physical achievement;

(iv) Anticipated adjustment of each foster family member to a foster child;

(v) Willingness to cooperate with the placement agency; and

(vi) Support network in place for the foster family, including support systems for single parent families, if applicable;

8. Finances and occupations of family members:

(i) Employment history, including whether the home is a registered family day care home;

(ii) Financial stability of the family;

(iii) Possible financial impact of the addition of a foster child to the home;

9. Home and community:

(i) Description of neighborhood;

(ii) Physical standards of the home, including:

(I) Space and sleeping arrangements, such that

I. Only bedrooms are used as sleeping space for children,

II. A maximum of two (2) children sleep in a double or larger bed, and only if they are of the same sex and under 5 years of age,

III. No child over one (1) year of age sleeps in a room with an adult,

IV. Children over three (3) years of age of different sexes do not share a bedroom, and

V. Children sleep in a bedroom with adequate space for clothing and personal possessions,

(II) The home is maintained in a condition to ensure the health and safety of children,

(III) Hazardous items are not accessible to children,

(IV) All firearms owned and in the home are locked away from children,

(V) If a swimming pool is present at the home, it is fenced with a locked gate to prevent unsupervised access and it meets all applicable community ordinances,

(VI) Each level of the home is equipped with a functional smoke alarm,

(VII) Water supply and sewage disposal systems which, if other than public systems, have been approved by appropriate authorities,

(VIII) Domestic pets owned or residing with the family have been inoculated against rabies as required by law, and

(IX) Gas heaters are vented to avoid fire and health hazards, with any unvented fuel-fired heaters equipped with oxygen depletion safety shut-off systems.

(iii) Assessment of community resources, including accessibility of schools, churches, recreation, medical facilities and mental health facilities;

10. Religion;

11. Results of the criminal records check for family members as required by Georgia law;

12. Pre-service training the prospective foster parent and/or family may have received;

13. A minimum of three (3) character references:

(i) At least one reference shall be from an extended family member not residing with the prospective foster family, and

(ii) If the prospective foster parent has either served previously as a foster parent for another agency, and/or been employed within the past five (5) years in a job involving the care of children, at least one reference must be from the former agency or employer;

14. A description of the type of child desired by the prospective foster family; and

15. The date the study is completed and the name and signature of the person completing the study.

(b) Notification of Approval. Potential foster parents shall be notified in writing as to whether or not their application has been approved.

(c) Location of Foster Homes. Foster homes used by the Agency shall be located within a reasonable travel distance from the Agency so as to be accessible for regular visits by family and Agency staff.

(6) Services Prior to Foster Care Placement.

(a) The selection of a foster home for a particular child shall be based on an assessment of the child's total needs and how well a particular home can meet the child's needs.

(b) Children of the same family shall be kept together when possible unless it has been determined through casework services that this is not desirable.

(c) Placement considerations shall include the potential for children's participation in religious and cultural activities in accordance with their cultural ethnic heritage.

(d) The Agency shall discuss the prospective foster placement with the foster family and shall prepare the foster family for the placement of a particular child by anticipating the adjustments and problems that may arise during placement and any specialized services to be provided. This discussion shall be documented in the case record.

(e) Pre-placement activities between child and foster family shall be documented in the case record of the child and family.

(f) Complete written placement agreement(s) shall be developed with the involvement of the child, the foster parent(s), the parent(s) or guardian(s), and the placing agency representative and signed by all adult parties; such agreement(s) shall include the following:

1. Written authorization to care for the child;
2. Written authorization to obtain medical care for the child;

(g) The Agency shall have a written agreement with the foster parent regarding its policies as to payment of board, arrangements for medical care, clothing incidental expenses, visits by parents, discipline, advance notices for removal when placements are terminated by foster parent and emergency procedures.

(7) Services During the Foster Care Placement.

(a) A plan of care, or case plan, for the foster child and the foster family shall be developed within 30 days from the date of placement.

1. The case plan shall be reevaluated for appropriateness in a case review conference at least every 6 months.

2. The involvement of the child, foster parent, Agency representative and, when appropriate the legal custody holder, shall be documented in the case plan.

(b) The case plan shall include, but not be limited to:

1. Reason for present foster care placement;

2. Statement of preliminary plans for discharge;
3. Statements of any special care and services that will be arranged for or provided directly;
4. Statements of time-limited goals and objectives for the child and family and methods of achieving them and evaluating them, and:
  - (i) Designation of responsibility for carrying out objectives with child, birth parents, foster parent, and Agency representative;
  - (ii) A method for evaluating and changing goals as needed;
5. A visitation plan, with any changes to the plan documented;
  - (i) Provisions for visits between parents and children shall be made, except where the parental rights have been terminated or where it is documented that visits are detrimental to the child.
  - (ii) The parents and the child shall be informed of the visitation plan.
  - (c) When the agency has a written contract with a state human services agency to provide home finding services only, and the state agency has prepared a case plan for the child and family, then the contracting Child-Placing Agency shall not be required to complete an additional case plan. The Child-Placing Agency must document that a case plan is in place at the time of placement of the child.
  - (d) The Agency shall provide for a complete health and dental program for each child including:
    1. A physical examination of the child shall be provided within 72 hours (excluding weekends and holidays) of placement. If the



child is being moved from a previous placement by a licensed agency or state agency, results from an examination completed within one year prior to the new placement shall be accepted for this requirement as long as there appears to be no obvious change in health status;

2. A general dental examination of a child over the age of three (3) years shall be provided for unless such an examination has been completed within 6 months prior to placement. Such examinations shall be done by either a dentist or a licensed dental hygienist.

3. Correction/improvement of health and dental defects (including an annual physical examination and a semiannual dental examination);

4. Immunizations appropriate for the age of the child.

(e) The Agency shall provide opportunity for academic and/or vocational training for each child in accordance with his ability and aptitude and as required by the school attendance laws of the state.

(f) Home visits shall be conducted by the Agency at least monthly in order to verify that the foster parents are delivering care in a safe and healthy environment to the children, in accordance with these rules and regulations and agency policies and procedures. Such visits shall include observation of the foster child with at least one of the foster parents.

(g) The Agency shall provide an annual evaluation of the strengths and needs of the foster family and assessment of the best way to maximize the foster care experience for the foster family and the children placed with them. This evaluation shall be shared with the foster family as evidenced by the signature of the foster parent(s) on the evaluation.

(h) Documentation of supervision of the placement by the agency shall include:

1. Adjustment of the child to the foster family and vice versa;
2. Progress made on treatment plan goals;
3. Any new problems that have arisen and the actions taken toward a solution of those problems;
4. Contacts and issues with other resources serving the child;
5. Agency updates reassessing the appropriateness of the foster care placement whenever a significant change occurs in the home, to ensure that care continues to be delivered in a safe and healthy environment in accordance with these rules and regulations and agency policies and procedures.
6. Documentation that the foster parents have received the required clock hours of training annually following the initial foster placement, with the training being relevant to the type(s) of children placed in the foster home.

(i) Termination of Agency care shall be determined by casework study and planning with the child and his family and/or the court or local public Agency responsible for the child.

(8) Behavior Management and Emergency Safety Interventions in Foster Care.

(a) Child training, behavior management, and emergency safety interventions shall be administered by the foster parent(s) and shall be appropriate to the child's age, intelligence, emotional makeup, and past experience.

(b) Techniques for child training and behavior management shall be positive in nature unless positive techniques, correctly and consistently applied, have been shown to be ineffective with the child.

(c) Behavior Management.

1. The agency shall develop and implement policies and procedures on behavior management. Such policies and procedures shall set forth the types of children served in accordance with its program purpose, the anticipated behavioral problems of the children, and acceptable methods of managing such problems.

2. Such behavior management policies and procedures shall incorporate the following minimum requirements:

(i.) Behavior management principles and techniques shall be used in accordance with written policies and procedures governing service expectations, treatment goals, safety, security, and these rules and regulations.

(ii.) Behavior management shall be limited to the least restrictive appropriate method in accordance with the prohibitions as specified in these rules and regulations.

3. The following forms of behavior management are prohibited and shall not be used;

(i.) Assignment of excessive or unreasonable work tasks that are not related to the child's misbehavior;

(ii.) Denial of meals and hydration;

(iii.) Denial of sleep;

(iv.) Denial of shelter, clothing, or essential personal needs;

- (v.) Denial of essential services;
  - (vi.) Verbal abuse, ridicule, or humiliation;
  - (vii.) Manual holds, chemical restraints, or mechanical restraints not used appropriately as emergency safety interventions;
  - (viii.) Denial of communication and visits with family unless restricted by case plan or court order;
  - (ix.) Corporal punishment;
  - (x.) Seclusion or confinement of a child in a room or area which may reasonably be expected to cause physical or emotional discomfort to the child; or
  - (xi.) Seclusion or confinement of a child to a room or area for periods longer than those appropriate to the child's age, intelligence, emotional makeup and previous experience, or confinement to a room or area without the supervision or monitoring necessary to ensure the child's safety and well-being.
- (4) Children shall not be permitted to participate in the behavior management of other children.
- (5) Agencies shall submit to the Department electronically or by facsimile a report within 24 hours whenever an unusual incident occurs regarding behavior management, including any injury requiring medical treatment beyond first aid that is received by a child as a result of any behavior management.
- (6) All forms of behavior management used by trained direct care staff or foster parents shall also be documented in case records in order to ensure that such records reflect behavior management problems.

(d.) Emergency Safety Interventions.

1. Emergency safety interventions may be used only by trained direct care staff or foster parents trained in the proper use of such interventions when a child exhibits a dangerous behavior reasonably expected to lead to immediate physical harm to the child or others and less restrictive means of dealing with the injurious behavior have not proven successful or may subject the child or others to greater risk of injury.

2. Emergency safety interventions shall not include the use of any restraint or manual hold that would potentially impair the child's ability to breathe or has been determined to be inappropriate for use on a particular child due to a documented medical or psychological condition.

3. The agency shall have and enforce written policies and procedures for the use of emergency safety interventions, a copy of which shall be provided to and discussed with each child and the child's foster parent(s) prior to or at the time of admission. Emergency safety intervention policies and procedures shall include:

(i.) Provisions for the documentation of an assessment at admission and at each annual exam by the child's physician, a physician's assistant, or a registered nurse with advanced training working under the direction of a physician, or a public health department that states there are no medical issues that would be incompatible with the appropriate use of emergency safety interventions on that child. Such assessment and documentation must be re-evaluated following any significant change in the child's medical condition; and

(ii.) Provisions for the documentation of each use of an emergency safety intervention including:

- (I) Date and description of the precipitating incident;
  - (II) Description of the de-escalation techniques used prior to the emergency safety intervention, if applicable;
  - (III) Environmental considerations;
  - (IV) Foster parent(s) or staff members participating in the emergency safety intervention;
  - (V) Any witnesses to the precipitating incident and subsequent intervention;
  - (VI) Exact emergency safety intervention used;
  - (VII) Documentation of the 15 minute interval visual monitoring of a child in seclusion;
  - (VIII) Beginning and ending time of the intervention;
  - (IX) Outcome of the intervention;
  - (X) Detailed description of any injury arising from the incident or intervention; and
  - (XI) Summary of any medical care provided.
- (iii.) Provisions for prohibiting manual hold use by any employee or foster parent not trained in prevention and use of emergency safety interventions.
4. Emergency safety interventions may be used to prevent runaway only when the child presents an imminent threat of physical harm to self or others.

5. Agency staff and foster parents shall be aware of each child's medical and psychological conditions, as evidenced by written acknowledgement of such awareness, to ensure that an emergency safety intervention that is utilized does not pose a danger to the physical or mental health of the child.

6. Children shall not be allowed to participate in the emergency safety intervention of other children.

7. Immediately following the conclusion of the emergency safety intervention and hourly thereafter for a period of at least four hours where the child is with a staff member or foster parent, the child's behavior will be assessed, monitored, and documented to ensure that the child does not appear to be exhibiting symptoms that would be associated with an injury. Authority O.C.G.A. §§ 49-5-8 and 49-5-12.

8. At a minimum, the emergency safety intervention program that is utilized shall include the following:

(i). Techniques for de-escalating problem behavior including child and adoptive parent debriefings;

(ii.) Appropriate use of emergency safety interventions;

(iii.) Recognizing aggressive behavior that may be related to a medical condition;

(iv.) Awareness of physiological impact of a restraint on the child;

(v.) Recognizing signs and symptoms of positional and compression asphyxia and restraint associated cardiac arrest;

(vi.) Instructions as to how to monitor the breathing, verbal responsiveness, and motor control of a child who is the subject of an emergency safety intervention;

(vii.) Appropriate self-protection techniques

(viii.) Policies and procedures relating to using manual holds, including the prohibition of any technique that would potentially impair a child's ability to breathe.

(ix.) Agency policies and reporting requirements;

(x.) Alternatives to restraint;

(xi.) Avoiding power struggles;

(xii.) Escape and evasion techniques;

(xiii.) Time limits for the use of restraint and seclusion;

(xiv.) Process for obtaining approval for continual restraints and seclusion;

(xv.) Procedures to address problematic restraints;

(xvi.) Documentation;

(xvii.) Investigation of injuries and complaints;

(xviii.) Monitoring physical signs of distress and obtaining medical assistance; and

(xix.) Legal issues



9. The emergency safety intervention training shall be in addition to the annual training required in Rule .04(6)(a) and (b) and shall be documented in the personnel record of the adoptive parents.

10. All actions taken that involve utilizing an emergency safety intervention shall be recorded in the child's record showing the cause for the emergency safety intervention, the emergency safety intervention used, and, if needed, approval by the executive director, the casework supervisor, and the physician who has responsibility for the diagnosis and treatment of the child's behavior.

11. Agencies shall submit to the Department electronically or by facsimile a report within 24 hours whenever an unusual incident occurs regarding emergency safety interventions, including:

(i.) Any injury requiring medical treatment beyond first aid that is received by a child as a result of any emergency safety intervention;

(ii.) For any agency with 20 or more foster placements, any 30-day period in which three or more instances of emergency safety interventions of a specific child occurred and/or whenever the agency has had a total of 10 emergency safety interventions for all children in care within the 30-day period; and

(iii.) For any agency with less than 20 foster placements, any 30-day period in which three or more instances of emergency safety interventions of a specific child occurred and/or whenever the agency has had a total of five instances for all children in care within the 30-day period.

12. Agencies shall submit a written report to the executive director on the use of any emergency safety intervention immediately after the conclusion of the intervention. A copy of such report shall be maintained in the child's file.

13. At least once per quarter, the agency, utilizing a master agency restraint log and the child's case record, shall review the use of all emergency safety interventions for each child and foster parent, including the type of intervention used and the length of time of each use, to determine whether there was a clinical basis for the intervention, whether the use of the emergency safety intervention was warranted, whether any alternatives were considered or employed, the effectiveness of the intervention or alternative, and the need for additional training. Written documentation of all such reviews shall be maintained. Where the agency identifies opportunities for improvement as a result of such reviews or otherwise, the agency shall implement these changes through an effective quality improvement plan.

14. No later than December 1, 2006 and ongoing thereafter, all foster parents who may be involved in the use of emergency safety interventions, shall have evidence of having satisfactorily completed a nationally recognized training program for emergency safety interventions to protect children and others from injury, which has been approved by the Department and taught by an appropriately certified trainer in such program.

15. Manual Holds

(i.) Emergency safety interventions utilizing manual holds require at least one trained staff member or foster parent to carry out the hold. Emergency safety interventions utilizing prone restraints require at least two trained staff members or foster parents to carry out the hold.

(ii.) Emergency safety interventions shall not include the use of any restraint or manual hold that would potentially impair the child's ability to breathe or has been determined to be inappropriate for use on a particular child due to a documented medical or psychological condition.

(iii.) When a manual hold is used upon any child whose primary mode of communication is sign language, the child shall be permitted to have his or her hands free from restraint for brief periods during the intervention, except when such freedom may result in physical harm to the child or others;

(iv.) If the use of a manual hold exceeds 15 consecutive minutes, the executive director or his or her designee, who possesses at least the qualifications of the executive director and has been fully trained in the agency's emergency safety intervention plan, shall be contacted by a two-way communications device or in person and determine that the continuation of the manual hold is appropriate under the circumstances. Documentation of any consultations and outcomes shall be maintained for each application of a manual hold that exceeds 15 minutes. Manual holds shall not be permitted to continue if the restraint is determined to pose an undue risk to the child's health given the child's physical or mental condition.

(v.) A manual hold may not continue for more than 30 minutes at any one time without the consultation as specified in subparagraph (2) of this subparagraph, and under no circumstances may a manual hold be used for more than one hour total within a 24-hour period.

(vi.) If the use of a manual hold on a child reaches a total of one hour within a 24-hour period, the staff shall reconsider alternative treatment strategies, document same, and consider notifying the authorities or transporting the child to a hospital or mental health facility for evaluation.

(vii.) The child's breathing, verbal responsiveness, and motor control shall be continuously monitored during any manual hold. Written summaries of the monitoring by a trained staff member or foster parent not currently directly involved in the manual hold shall be recorded every 15 minutes during the duration of the

restraint. If only one trained staff member or foster parent is involved in the restraint and no other trained staff member or parent is available, written summaries of the monitoring of the manual hold shall be recorded as soon as is practicable, but no later than one hour after the conclusion of the restraint.

16. Seclusion.

1. If used, seclusion procedures in excess of thirty (30) minutes must be approved by the executive director or designee. No child shall be placed in a seclusion room or area in excess of one (1) hour within any twenty-four (24) hour period without obtaining authorization for continuing such seclusion from the child's physician, psychiatrist, or licensed psychologist and documenting such authorization in the child's record

2. A seclusion room or area shall only be used if a child is in danger of harming himself or herself or others.

3. A child placed in a seclusion room or area shall be visually monitored at least every 15 minutes.

4. A room or area used for the purposes of seclusion must meet the following criteria:

(i) The room or area shall be constructed and used in such ways that the risk of harm to the child is minimized;

(ii) The room or area shall be constructed so that a staff member or foster parent can visually monitor the child;

(iii) The room shall be lighted and well-ventilated;

(iv) The room shall be a minimum fifty (50) square feet in area; and

(v) The room must be free of any item that may be used by the child to cause physical harm to himself/herself or others.

5. No more than one child shall be placed in the seclusion room or area at a time.

6. A seclusion room monitoring log shall be maintained and used to record the following information:

- (i) Name of the secluded child;
- (ii) Reason for child's seclusion;
- (iii) Time of child's placement in the seclusion room or area;
- (iv) Name and signature of the adoptive parent that conducted visual monitoring;
- (v) Signed observation notes; and
- (vi) Time of the child's removal from the seclusion room or area.

(9) Maintenance of Foster Care Records.

(a) The Agency shall maintain separate records for each foster home. The record shall be started at the time of application and shall be kept current.

(b) The foster home record shall contain:

- 1. The application;
- 2. Home study;

3. Medical reports for each member of the foster family;
  4. Summary narrative containing the dates as well as the content material from the caseworker's contacts;
  5. References;
  6. The annual evaluations of the foster home, family, and placements;
  7. Placement history of the foster home, children placed, date(s) admitted, date(s) discharged and reason for discharge;
  8. Documentation of satisfactory criminal records checks in accordance with Georgia law.
  9. Phone numbers of foster parents including day, cell & evening phone numbers and the days of the week and times of day the foster parent is likely to be accessible at the foster home
  10. Foster children currently in the foster home including the child's name & county of custody.
- (c) Foster home records shall be maintained for at least 3 years following the Agency's last placement in said foster home.
- (d) The Agency shall maintain separate records for each child placed in foster care. The record for each child shall include:
1. Name, sex, race, birth date and birthplace of child;
  2. Name, address, telephone number and marital status of parent or guardian of the child;

3. Name, address, telephone number of the foster parent with whom the child is currently placed;

4. Legal documents including verified birth record, court status, agreements, consents, etc.;

5. Social history of the family and parent background;

6. Medical history and cumulative health record, psychological and psychiatric reports;

7. Education records and reports;

8. Plan of care pursuant to these rules;

9. Summary of each 6 month case review conference which reflects the contacts with and the status of all family members in relation to the placement plan as well as the achievements or changes in the goals or services;

10. Summary of child's contacts with the family, the quality of the relationships and the child's progress in coping;

(e) Upon termination of placement of the child, the following shall be placed in the record of the child and the foster home:

1. Date of termination, reason for termination, the name, telephone number, address, and relationship of the person or Agency assuming responsibility for the child.

2. A termination summary describing the services provided during care, growth and accomplishments, and assessed needs which remain to be met with the service possibilities, which might meet those needs.

3. Aftercare plans that determine the responsibility for follow through.

(f) Family/child records shall be maintained for at least 3 years following completion of service.

Authority O.C.G.A. Sec. 49-5-12, and Sec. 49-5-60.

### **290-9-2-.13 Enforcement and Penalties.**

(1) **Plans of Correction.** If the Department determines that either a child-placing agency or a facility applying to become licensed as a child-placing agency does not comply with the rules, the Department shall provide written notice specifying the rule(s) violated and setting a time for the agency not to exceed ten (10) working days within which to file an acceptable written plan of correction where the Department has determined that an opportunity to correct is permissible. If such plan of correction is determined not acceptable to the Department because it does not adequately correct the identified violation, the Department will advise the child-placing agency or facility applying to become licensed that the plan of correction is not acceptable. The Department may permit the agency to submit a revised plan of correction.

(a) The agency shall comply with an accepted plan of correction.

(b) Where the Department determines that either the child-placing agency or the facility applying to become licensed as a child-placing agency has not filed an acceptable plan of correction or has not complied with the accepted plan of correction, the Department may initiate an adverse action to enforce these rules.

(2) All adverse actions to enforce the Rules and Regulations for Child-Placing Agencies shall be initiated in accordance with the Rules and Regulations for Enforcement of Licensing



Requirements, Chapter 290-1-6, and O.C.G.A. §§ 49-5-12 and 49-5-12.1, Penalties for Violation of Child Welfare Agency Laws and Regulations and § 49-5-60 *et seq.* and the requirements set forth herein.

**(3) Required Notifications for Revocations and Suspensions.**

The agency shall notify each child's parents and/or legal guardians of the Department's actions to revoke the license or seek an emergency suspension of the agency's license to operate.

(a) The official notice of the revocation or emergency suspension action and any final resolution, together with the Department's complaint intake phone number and website address, shall be provided by the agency to each current and prospective child's parents and/or legal guardians.

(b) The agency shall ensure the posting of the official notice at the agency in an area that is visible to each child's parents and/or legal guardians.

(c) The agency shall ensure that the official notice continues to be visible to each child's parents and/or legal guardians throughout the pendency of the revocation and emergency suspension actions, including any appeals.

(d) The agency shall have posted in an area that is readily visible to each child's parents and/or legal guardians any inspection reports that are prepared by the Department during the pendency of any revocation or emergency suspension action.

(e) It shall be a violation of these rules for the agency to permit the removal or obliteration of any posted notices of revocation, emergency suspension action, resolution, or inspection survey during the pendency of any revocation or emergency suspension action.

(f) The Department may post an official notice of the revocation or emergency suspension action on its website or share the notice of the revocation or emergency suspension action and any information pertaining thereto with any other agencies that may have an interest in the welfare of the children in care of the agency.

(g) The Department may suspend any requirements of these rules and the enforcement of any rules where the Governor of the State of Georgia has declared a public health emergency.  
Authority O.C.G.A. §§ 31-2-6, 49-5-8, and 49-5-12.